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LB 559

room. The patient was many, many miles away in Callaway, Nebraska. And it came to me that I'd really not paid much attention to all this technology. That all seems so far away. And here it was in central Nebraska that we didn't have to pay this specialist who would go to Callaway maybe once a month, maybe quarterly, that all of a sudden someone in a faraway community could be examined by a specialist who they'd never have the opportunity to see or who it would be very, very difficult to go see. They were also there with their own physician, who could listen to the specialist at the same time so that when that person, if they would have had to have traveled all those miles down to Good Samaritan Hospital to meet with a specialist and then when they would go back home to their own doctor the doctor would say, well, what did that specialist tell you, and then there would be this difficult conversation. This provided such a wonderful forum where the physician could be there with their own patient, receive care that they would have not received, wouldn't have to travel, didn't have to wait in a waiting room, and the specialist could see so many more people that day because they didn't have to spend the time traveling, and the good thing is it was all done by what's called telehealth. LB 559 takes telehealth and applies it to the Medicaid area. Medicaid, and I really want to thank the Health Committee who spent a lot of time on this and effort and energy, and Senator Jensen who prioritized this bill, but this really is the future for Nebraska. Federal Medicaid allows us to reimburse and they recognize telehealth as an appropriate way to deliver health services. The issue is, how do you reimburse that? And this bill has many, many issues into it and many, many things that it does, but I want to give you the broad overview first and then we can talk about specifics. What happens so often with new delivery systems is that they're just that, they're new. This is so well-received by people who use telehealth that it will not only catch on in rural Nebraska but it's also going to be true in the larger cities as well, the sharing of specialists between facilities. This does not expand Medicaid. Other words, we're not allowing new services, we're not allowing things that wouldn't be done before. The bill's going to provide that you have to be a Nebraska certified Medicaid provider. So we're not broadening out the sorts, but what can this do? It can save us some money too. Now there may be those who will skeptical and say, well, maybe it's going to